PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

09760595

CLAIMS AS FILED - PART (Column 1)					(Column 2)		SMALL ENTITY TYPE		OR	OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			19				RATE	FEE	7	RATE	FEE	
FOR			NUMBER FILED		NUMB	ER EXTRA	BASIC F	EE 355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			19 minus 20=				X\$ 9=	=	OR	X\$18=		
INDEPENDENT CLAIMS			2 minus 3 =		*		X40=	:	OR	X80=		
MULTIPLE DEPENDENT CLAIM P			RESENT				+135:	= .	OR	+270=		
* If	the difference	in column 1 is	less than ze	ro, enter	"0" in c	olumn 2	TOTA	Li .	OR	TOTAL	710	
	C	LAIMS AS A	MENDED - PART II				*			OTHER THAN OR SMALL ENTITY		
	•	(Column 1)		(Colum		(Column 3)	SMAL	L ENTITY	OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER USLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	X\$ 9=	=	OR	X\$18=		
	Independent	*	Minus	***	01.411.4	=	X40=		OR	X80=		
	FIRST PRESE	NTATION OF M	ULTIPLE DEF	ENDENT	CLAIM		+135=		OR	+270=		
							TOT		-	TOTAL ADDIT, FEE		
		(Column 1)		(Colum	nn 2)	(Column 3)	ADDIT. FI		7	AUUN. PEE		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO	EST BER OUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	X\$ 9=	3.0	OR	X\$18=	*	
	Independent	*	Minus	***		=	X40=	w1,5 · · ·	OR	X80=	·	
L	FIRST PRESE	NTATION OF M	ULTIPLE DEF	PENDENT	CLAIM		+135=	= .	OR	+270=		
		·-					TOT		OR	TOTAL		
					6 \	(0.1 0)	ADDIT. F	EE L		ADDIT. FEE	*	
_		(Column 1) CLAIMS		(Colun		(Column 3)			¬		18 -	
AMENDMENT C	·	REMAINING AFTER AMENDMENT		NUME PREVIO PAID	BER DUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	X\$ 9=	=	OR	X\$18=		
	Independent	*	Minus	***		=	X40=		OR	X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								100		· · · · · ·	
	If the ntni in act	ımn 1 is lass than	the entry in col-	ımn 2 weita	. "O" in co	olumo 3	+135=	i	OR	,+270=		
* If the ntry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
	The "Highest Nur	mber Previously Pa	aid For" (Total o	r Independ	ent) is th	e highest numbe	er found in the	appropriate t	ox in c	olumn 1.	1/	